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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	rmation unless it displays a valid OMB control number.
Application retiriber	10561936
Filing Date	December 22, 2005
First Named Inventor	Green
Title	INTUMESCENT COATING COMPOSITION
Art Unit	
Examiner Name	<u>-</u>
Attorney Docket Number	

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•••	Applicant or Assig	gnee of Record			
Signature			Date	5 44 HP 205	
Name JOHN DARRYL GREEN			Telephone	<u> </u>	
Title and Company INVENTOR					
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					
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Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/S)6)					
Signature of Applican	t or Assignee of Record					
Signature // // Signature	Date 8 Marile 2) 				
Name WILLIAM ALLEN	Telephone					
Title and Company INVENTOR	······································					
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